Case 17-80017 Doc 1 Filed 01/04/17 Entered 01/04/17 16:39:01 Desc Main Document Page 1 of 66

| Fill in this information to identify your case: | | |
|---|-------------------------------|---------------------------------|
| United States Bankruptcy Court for the: | | |
| NORTHERN DISTRICT OF ILLINOIS | | |
| Case number (if known) | Chapter you are filing under: | |
| | Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | rt 1: | dentify Yourself | | | |
|-----|---------------------------------------|---|---|---|---|
| | | | About Debtor 1: | A | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your | full name | | | |
| | your g picture examp license | the name that is on povernment-issued to identification (for one, your driver's the or passport). | Terrell First name D Middle name | | First name Middle name |
| | identif | your picture ication to your ng with the trustee. | Hanson Last name and Suffix (Sr., Jr., II, III) | L | Last name and Suffix (Sr., Jr., II, III) |
| 2. | | her names you have in the last 8 years | | | |
| | | e your married or n names. | | | |
| 3. | your S numb Indivi | the last 4 digits of Social Security er or federal dual Taxpayer fication number | xxx-xx-9524 | | |

Case 17-80017 Doc 1 Filed 01/04/17 Entered 01/04/17 16:39:01 Desc Main Document Page 2 of 66

Case number (if known)

Debtor 1 Terrell D Hanson

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. ☐ I have not used any business name or EINs. used in the last 8 years Include trade names and Business name(s) Business name(s) doing business as names EINs EINs Where you live If Debtor 2 lives at a different address: 129 W Madison St Belvidere, IL 61008 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code **Boone** County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing Check one: Check one: this district to file for bankruptcy Over the last 180 days before filing this petition, I Over the last 180 days before filing this petition, have lived in this district longer than in any other I have lived in this district longer than in any district. other district. I have another reason. I have another reason. Explain. (See 28 U.S.C. § 1408.) Explain. (See 28 U.S.C. § 1408.)

Case 17-80017 Doc 1 Filed 01/04/17 Entered 01/04/17 16:39:01 Desc Main Document Page 3 of 66

Case number (if known) Debtor 1 Terrell D Hanson

| Par | Tell the Court About | our Bar | kruptcy Ca | se | | | | | |
|-----|--|---------------|--|---|----------------------------|---|---|--|--|
| 7. | The chapter of the Bankruptcy Code you are | | | orief description of each, see go to the top of page 1 and | | | C. § 342(b) for Individu | uals Filing for Bankruptcy | |
| | choosing to file under | ■ Chapter 7 | | | | | | | |
| | | ☐ Cha | pter 11 | | | | | | |
| | | ☐ Cha | pter 12 | | | | | | |
| | | ☐ Cha | • | | | | | | |
| | | | ' | | | | | | |
| 8. | How you will pay the fee | a o | ■ I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. | | | | | | |
| | | | | the fee in installments. If e in Installments (Official Fo | | e this option, sign | and attach the Applica | ation for Individuals to Pay | |
| | | | • | t my fee be waived (You m | , | this option only if | you are filing for Chap | oter 7. By law, a judge may, | |
| | | b a | ut is not req oplies to you | | I may do so able to pay | only if your incor the fee in installr | ne is less than 150% onents). If you choose | of the official poverty line that this option, you must fill out | |
| 9. | Have you filed for bankruptcy within the last 8 years? | □ No. ■ Yes. | | | | | | | |
| | lust o years. | — 163. | | Northern District | | | | | |
| | | | District | Illinois | When | 3/28/14 | Case number | 14-80624 | |
| | | | District | | When | | Case number | | |
| | | | District | | When | | Case number | | |
| | | | | | | | | | |
| 10. | Are any bankruptcy | ■ No | | | | | | | |
| | cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ☐ Yes. | | | | | | | |
| | | | Debtor | | | | Relationship to y | ou | |
| | | | District | | When | | Case number, if | known | |
| | | | Debtor | | | | Relationship to y | ou | |
| | | | District | | When | | Case number, if | known | |
| 11. | Do you rent your | ■ No. | Go to li | ine 12. | | | | | |
| | residence? | ☐ Yes. | Has yo | ur landlord obtained an evic | tion judgm | ent against you ar | nd do you want to stay | in your residence? | |
| | | | | No. Go to line 12. | - | | · | | |
| | | | | Yes. Fill out <i>Initial Statemen</i> bankruptcy petition. | nt About ar | n Eviction Judgme | nt Against You (Form | 101A) and file it with this | |

Document Page 4 of 66 Case number (if known) Debtor 1 Terrell D Hanson Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. husiness? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of **Bankruptcy Code and are** operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ☐ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any No. property that poses or is ☐ Yes. alleged to pose a threat of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs needed, why is it needed? immediate attention?

Number, Street, City, State & Zip Code

Where is the property?

For example, do you own perishable goods, or

livestock that must be fed, or a building that needs urgent repairs? Case 17-80017 Doc 1 Filed 01/04/17 Entered 01/04/17 16:39:01 Desc Main Document Page 5 of 66

Debtor 1 Terrell D Hanson

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 □ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 17-80017 Doc 1 Filed 01/04/17 Entered 01/04/17 16:39:01 Desc Main Document Page 6 of 66

| Deb | tor 1 Terrell D Hanson | | Docume | Case numb | per (if known) | | | |
|------|--|---|--------------------------------------|---|---|--|--|--|
| Part | 6: Answer These Quest | ions for R | eporting Purposes | | | | | |
| 16. | What kind of debts do you have? | 16a. | | onsumer debts? Consumer debts are defond, family, or household purpose." | fined in 11 U.S.C. § 101(8) as "incurred by an | | | |
| | | | ☐ No. Go to line 16b. | | | | | |
| | | | ■ Yes. Go to line 17. | | | | | |
| | | 16b. Are your debts primarily business debts? <i>Business debts</i> are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. | | | | | | |
| | | | ☐ No. Go to line 16c. | | | | | |
| | | | ☐ Yes. Go to line 17. | | | | | |
| | | 16c. | State the type of debts you ov | we that are not consumer debts or busine | ess debts | | | |
| 17. | Are you filing under Chapter 7? | □ No. | I am not filing under Chapter | 7. Go to line 18. | | | | |
| | Do you estimate that after any exempt property is excluded and | ■ Yes. | | Oo you estimate that after any exempt pro ailable to distribute to unsecured creditors | perty is excluded and administrative expenses s? | | | |
| | administrative expenses are paid that funds will | | ■ No | | | | | |
| | be available for distribution to unsecured creditors? | | ☐ Yes | | | | | |
| 18. | How many Creditors do you estimate that you owe? | □ 1-49 ■ 50-99 | | ☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,000 | ☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000 | | | |
| | | ☐ 100-1 ☐ 200-9 | | 1 0,001-23,000 | □ More than 100,000 | | | |
| 19. | How much do you | ■ \$0 - \$ | 50,000 | ☐ \$1,000,001 - \$10 million | ☐ \$500,000,001 - \$1 billion | | | |
| | estimate your assets to be worth? | | 01 - \$100,000 | □ \$10,000,001 - \$50 million | □ \$1,000,000,001 - \$10 billion | | | |
| | | | 001 - \$500,000 001 - \$1 million | ☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million | ☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion | | | |
| 20. | How much do you | □ \$0 - \$ | 50,000 | ☐ \$1,000,001 - \$10 million | ☐ \$500,000,001 - \$1 billion | | | |
| | estimate your liabilities to be? | | 001 - \$100,000 | □ \$10,000,001 - \$50 million | \$1,000,000,001 - \$10 billion | | | |
| | | | 001 - \$500,000 001 - \$1 million | ☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million | ☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion | | | |
| Part | 7: Sign Below | | | | | | | |
| For | you | I have ex | amined this petition, and I decl | lare under penalty of perjury that the info | rmation provided is true and correct. | | | |
| | | | | , I am aware that I may proceed, if eligible blief available under each chapter, and I c | e, under Chapter 7, 11,12, or 13 of title 11, choose to proceed under Chapter 7. | | | |
| | | | | ot pay or agree to pay someone who is ne notice required by 11 U.S.C. § 342(b). | ot an attorney to help me fill out this | | | |
| | | I request | relief in accordance with the cl | hapter of title 11, United States Code, spe | ecified in this petition. | | | |
| | | bankrupto and 3571 | cy case can result in fines up to | concealing property, or obtaining money o \$250,000, or imprisonment for up to 20 | or property by fraud in connection with a years, or both. 18 U.S.C. §§ 152, 1341, 1519, | | | |
| | | Terrell I | D Hanson e of Debtor 1 | Signature of Debt | or 2 | | | |
| | | Executed | January 4, 2017 MM / DD / YYYY | Executed on MI | M / DD / YYYY | | | |
| | | - | | | | | | |

Debtor 1 Terrell D Hanson Page 7 of 66

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Karl C. | Koonmen | Date | January 4, 2017 | |
|-----------------|------------------------|---------------|-----------------|--|
| Signature of | f Attorney for Debtor | | MM / DD / YYYY | |
| Karl C. Ko | onmen | | | |
| Printed name | | | | |
| Loves Par | k Legal Clinic | | | |
| Firm name | | | | |
| The Profes | ssional Building | | | |
| 535 Loves | Park Drive | | | |
| Loves Par | k, IL 61111 | | | |
| Number, Street, | City, State & ZIP Code | | | |
| Contact phone | 815-654-3060 | Email address | | |
| | | | | |
| Bar number & S | state | | | |

Document Page 8 of 66 Fill in this information to identify your case: **Terrell D Hanson** Middle Name Last Name First Name First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS

> ☐ Check if this is an amended filing

Official Form 106Sum

Debtor 1

Debtor 2

(Spouse if, filing)

Case number (if known)

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| | | | assets of what you own |
|-----|--|------------|---------------------------|
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 0.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 29,755.00 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 29,755.00 |
| Par | t 2: Summarize Your Liabilities | | |
| | | | iabilities nt you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 3,804.57 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 16,582.04 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 310,797.48 |
| | Your total liabilities | \$ | 331,184.09 |
| Par | t 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 4,942.00 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 4,829.00 |
| Par | 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | r other so | hedules. |
| 7. | ■ Yes What kind of debt do you have? | | |

the court with your other schedules. Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Case 17-80017 Doc 1 Filed 01/04/17 Entered 01/04/17 16:39:01 Desc Main Document Page 9 of 66

Debtor 1 Terrell D Hanson Document Page 9 of 66
Case number (if known)

| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14. | \$ | 5,532.00 |
|----|--|----|----------|
| | | 1 | |

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total | l claim |
|--|-------|-----------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 16,582.04 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$_ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$_ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$_ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 16,582.04 |

| F:11 to 4 | h ! - ! - f | | Document | Page 10 of 66 | | |
|------------------------|--------------|---|---|--------------------------------|--|--|
| | | ation to identify your | | | | |
| Debtor | 1 | Terrell D Hanson | Middle Name | Last Name | | |
| Debtor : | 2 | | | | | |
| (Spouse, i | if filing) | First Name | Middle Name | Last Name | | |
| United S | States Ban | kruptcy Court for the: | NORTHERN DISTRICT OF ILL | NOIS | | |
| Case nu | umber | | | | | ☐ Check if this is a |
| | | | | _ | | amended filing |
| | | | | | | |
| Offici | ial For | m 106A/B | | | | |
| _ | | A/B: Prop | ertv | | | 12/15 |
| | | | e items. List an asset only once. If | an asset fits in more than o | ne category list the asset in | |
| hink it fi nformati | ts best. Be | as complete and accura space is needed, attach | ate as possible. If two married peop a separate sheet to this form. On the | le are filing together, both a | re equally responsible for su | pplying correct |
| Part 1: | Describe E | ach Residence, Building | g, Land, or Other Real Estate You O | wn or Have an Interest In | | |
| 1. Do yo | u own or ha | ave any legal or equitabl | e interest in any residence, building | յ, land, or similar property? | | |
| ■ No | . Go to Part | 2. | | | | |
| ☐ Yes | s. Where is | the property? | | | | |
| | | | | | | |
| Part 2: | Describe Y | our Vehicles | | | | |
| □ No ■ Ye | es | | tility vehicles, motorcycles | | Do not deduct secured cl | aims or exemptions. Put |
| • | | udi 17 | Who has an interest in the | ne property? Check one | the amount of any secure | d claims on Schedule D: |
| | | 008 | Debtor 1 only ☐ Debtor 2 only | | Creditors Who Have Clair | , , , |
| | Approximate | | B000 Debtor 1 and Debtor 2 | only | Current value of the entire property? | Current value of the portion you own? |
| _ | Other inform | ation: | At least one of the deb | | | |
| | | | Check if this is comm | nunity property | \$7,000.00 | \$7,000.00 |
| 3.2 N | Make: C | hrysler | Who has an interest in t | no proporty? Charleson | Do not deduct secured cla | aims or exemptions. Put |
| | _ | T Cruiser | Debtor 1 only | ie property: Check one | the amount of any secure Creditors Who Have Clair | |
| | | 003 | Debtor 2 only | | Current value of the | Current value of the |
| A | Approximate | mileage: 140 | Debtor 1 and Debtor 2 | only | entire property? | portion you own? |
| | Other inform | ation: | At least one of the deb | tors and another | | |
| | | | Check if this is comn (see instructions) | nunity property | \$500.00 | \$500.00 |
| | | | | | | |
| / Wate | rcraft air | eraft motor homes A | TVs and other recreational veh | icles other vehicles and | d accessories | |
| | | | onal watercraft, fishing vessels, s | | | |
| · | | | • | • | | |
| | ples: Boats | | .TVs and other recreational veh onal watercraft, fishing vessels, s | | | |

☐ Yes

Case 17-80017 Doc 1 Filed 01/04/17 Entered 01/04/17 16:39:01 Desc Main Document Page 11 of 66 Case number (if known) Debtor 1 **Terrell D Hanson** 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$7,500.00 pages you have attached for Part 2. Write that number here..... Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware No ☐ Yes. Describe..... 7 Flectronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games □ No Yes. Describe..... \$500.00 Cell phone, Audio Equipment 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... \$500.00 **Everyday clothes** 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ☐ No Yes. Describe..... \$200.00 Wedding band 13. Non-farm animals

Examples: Dogs, cats, birds, horses

No

☐ Yes. Describe.....

14. Any other personal and household items you did not already list, including any health aids you did not list

■ No

☐ Yes. Give specific information.....

Case 17-80017 Doc 1 Filed 01/04/17 Entered 01/04/17 16:39:01 Desc Main Document Page 12 of 66

Case number (if known) Debtor 1 **Terrell D Hanson** 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1,200.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ■ No ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: Yes..... \$1,000.00 PNC Bank - checking 17.1. \$5.00 PNC Bank - savings 17.2 chase Bank - checking \$50.00 17.3 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name: Wisconsin Retirement Fund \$20,000.00 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No ☐ Yes. Institution name or individual:

Case 17-80017 Doc 1 Filed 01/04/17 Entered 01/04/17 16:39:01 Desc Main Document Page 13 of 66 Case number (if known) Debtor 1 **Terrell D Hanson** 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ☐ Yes..... Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No ☐ Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No ☐ Yes. Give specific information..

33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment

Examples: Accidents, employment disputes, insurance claims, or rights to sue

■ No

☐ Yes. Describe each claim.......

| | Case 17-80017 | Doc 1 F | iled 01/04/17 Document | Entered 0: Page 14 of | | Desc Main |
|--------------|--|----------------------|---------------------------|--------------------------|-----------------------------|-------------------------|
| Debt | or 1 Terrell D Hanson | | Document | | Case number (if known) | |
| | ther contingent and unliquidat No Yes. Describe each claim | | ery nature, includin | g counterclaims o | of the debtor and rights to | set off claims |
| 35 A | ny financial assets you did not | t already list | | | | |
| | No | , | | | | |
| | Yes. Give specific information | | | | | |
| | Add the dollar value of all of yo for Part 4. Write that number h | | | | - | \$21,055.00 |
| Part s | Describe Any Business-Related | l Property You Ow | n or Have an Interest I | n. List any real esta | te in Part 1. | |
| 37. D | o you own or have any legal or equi | itable interest in a | ny business-related pr | operty? | | |
| _ | No. Go to Part 6. | | | | | |
| | Yes. Go to line 38. | | | | | |
| | | | | | | |
| Part 6 | Describe Any Farm- and Comme If you own or have an interest in fa | | | n or Have an Interes | et In. | |
| 46. D | o you own or have any legal o | r equitable inter | est in any farm- or o | commercial fishin | g-related property? | |
| I | No. Go to Part 7. | | | | | |
| I | Yes. Go to line 47. | | | | | |
| Part 7 | Describe All Property You | Own or Have an Ir | nterest in That You Did | Not List Above | | |
| | o you have other property of a Examples: Season tickets, countr | | | | | |
| | No | | | | | |
| Ц | Yes. Give specific information | | | | | |
| 54. | Add the dollar value of all of yo | our entries from | Part 7. Write that n | umber here | | \$0.00 |
| Part 8 | List the Totals of Each Part | of this Form | | | | |
| 55. | Part 1: Total real estate, line 2 | | | | | \$0.00 |
| 56. | Part 2: Total vehicles, line 5 | | | \$7,500.00 | | · |
| 57. | Part 3: Total personal and hou | sehold items, lir | ne 15 | \$1,200.00 | | |
| 58. | Part 4: Total financial assets, l | ine 36 | | \$21,055.00 | | |
| 59. | Part 5: Total business-related | property, line 45 | <u> </u> | \$0.00 | | |
| | Part 6: Total farm- and fishing- | | /, line 52 | \$0.00 | | |
| 61. | Part 7: Total other property no | t listed, line 54 | + | \$0.00 | | |
| 62. | Total personal property. Add lin | nes 56 through 6 | 1 | \$29,755.00 | Copy personal property t | otal \$29,755.00 |
| 63. | Total of all property on Schedu | ule A/B. Add line | 55 + line 62 | | | \$29,755.00 |

Official Form 106A/B Schedule A/B: Property page 5

| | | Docume | IIL FAUE 13 01 00 | |
|---|-------------------------|-------------------|-------------------|--------------------------------------|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Terrell D Hanson | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | ☐ Check if this is an amended filing |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Part 1: | Identify the | Property | You Claim | as Exempt |
|---------|--------------|----------|-----------|-----------|
|---------|--------------|----------|-----------|-----------|

| Which set of exemptions are you claiming? Check one only, even if your spouse is filing y | with vou |
|---|----------|
|---|----------|

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amount of the exemption you claim | | Specific laws that allow exemption | |
|---|--------------------------------------|-----------------------------------|---|------------------------------------|--|
| | Copy the value from Schedule A/B | Che | ck only one box for each exemption. | | |
| 2008 Audi Q7 178000 miles Line from <i>Schedule A/B</i> : 3.1 | \$7,000.00 | | \$2,400.00 | 735 ILCS 5/12-1001(c) | |
| Zillo Ilolii Gollicado 702. et l | | | 100% of fair market value, up to any applicable statutory limit | | |
| 2008 Audi Q7 178000 miles | \$7,000.00 | | \$2,245.00 | 735 ILCS 5/12-1001(b) | |
| Ellie IIolii Genedale AVB. G.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| 2003 chrysler PT Cruiser 140000 miles | \$500.00 | | \$0.00 | 735 ILCS 5/12-1001(b) | |
| Line from Schedule A/B: 3.2 | | | 100% of fair market value, up to any applicable statutory limit | | |
| Cell phone, Audio Equipment Line from Schedule A/B: 7.1 | \$500.00 | | \$500.00 | 735 ILCS 5/12-1001(b) | |
| Line Holli Schedule AVD. 1.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| Everyday clothes Line from Schedule A/B: 11.1 | \$500.00 | | \$500.00 | 735 ILCS 5/12-1001(a) | |
| Ello II olii ooliodalo FVD. 1111 | | | 100% of fair market value, up to any applicable statutory limit | | |

Case 17-80017 Doc 1 Filed 01/04/17 Entered 01/04/17 16:39:01 Desc Main Document Page 16 of 66

Case number (if known)

| De | Terreir D nanson | | | Case number (ii known) | |
|--|--|---|-----------------------------------|---|------------------------------------|
| Brief description of the property and line on Schedule A/B that lists this property | | Current value of the portion you own | Amount of the exemption you claim | | Specific laws that allow exemption |
| | | Copy the value from Check only Schedule A/B | | eck only one box for each exemption. | |
| | Wedding band Line from Schedule A/B: 12.1 | \$200.00 | | \$200.00 | 735 ILCS 5/12-1001(b) |
| | | | | 100% of fair market value, up to any applicable statutory limit | |
| | PNC Bank - checking Line from Schedule A/B: 17.1 | \$1,000.00 | | \$1,000.00 | 735 ILCS 5/12-1001(b) |
| | | | | 100% of fair market value, up to any applicable statutory limit | |
| | PNC Bank - savings Line from Schedule A/B: 17.2 | \$5.00 | | \$5.00 | 735 ILCS 5/12-1001(b) |
| | 2.110 110111 007.000.007. | | | 100% of fair market value, up to any applicable statutory limit | |
| | chase Bank - checking Line from Schedule A/B: 17.3 | \$50.00 | | \$50.00 | 735 ILCS 5/12-1001(b) |
| | Zino nom conceano / v.z. 1110 | | | 100% of fair market value, up to any applicable statutory limit | |
| | Wisconsin Retirement Fund Line from Schedule A/B: 21.1 | \$20,000.00 | | \$20,000.00 | 735 ILCS 5/12-1006 |
| | 2.110 110 11 00 / Cdd. 10 / V. 2. 2 1 · · · | | | 100% of fair market value, up to any applicable statutory limit | |
| 3. | Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every | | | led on or after the date of adjustmen | v+) |
| | ■ No | 5 years after that for ca | 1303 11 | led on or after the date of adjustifier | ш.) |
| | ☐ Yes. Did you acquire the property cove | red by the exemption wi | ithin 1 | ,215 days before you filed this case | ? |
| | □ No | | | • | |
| | ☐ Yes | | | | |

| С | ase 17-80017 | Doc 1 Filed 01/0 | | d 01/04/17 16:3 ' of 66 | 9:01 Desc M | 1ain |
|---------------------------------|--------------------------------|---|------------------------|--|--|-----------------------------------|
| Fill in this info | rmation to identify yοι | ır case: | | | | |
| Debtor 1 | Terrell D Hanso | n Middle Name | Last Name | | | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | | | |
| United States B | ankruptcy Court for the | NORTHERN DISTRICT | OF ILLINOIS | | | |
| Case number (if known) | | | | | | if this is an led filing |
| Official For Schedule | | Who Have Clair | ms Secure | d by Property | 1 | 12/15 |
| | he Additional Page, fill it | If two married people are filing out, number the entries, and at | | | | |
| • | , rs have claims secured by | y your property? | | | | |
| ☐ No. Che | ck this box and submit t | his form to the court with you | other schedules. Y | ou have nothing else to | report on this form. | |
| Yes. Fill | in all of the information | below. | | | | |
| Part 1: List | All Secured Claims | | | | | |
| for each claim. If | more than one creditor has | more than one secured claim, list a particular claim, list the other c cal order according to the credito | reditors in Part 2. As | Column A Amount of claim Do not deduct the value of collateral. | Column B Value of collateral that supports this claim | Column C Unsecured portion If any |
| | of Illinois | Describe the property that se | cures the claim: | \$3,804.57 | \$7,000.00 | \$0.00 |
| Creditor's Na | me | 2008 Audi Q7 178000 n | | | | |
| | teway Center Dr e, IL 61008 | As of the date you file, the claapply. Contingent | aim is: Check all that | | | |
| Number, Stre | eet, City, State & Zip Code | ☐ Unliquidated | | | | |

| Date debt was incurred | 2016 | Last 4 digits of account number | 5036 | | |
|-----------------------------|-----------------------|--|------|------------|--|
| | | | | | |
| Add the dollar value of | your entries in Colur | nn A on this page. Write that number h | ere: | \$3,804.57 | |
| If this is the last page of | • | dollar value totals from all pages. | | \$3,804.57 | |

 $\hfill \square$ An agreement you made (such as mortgage or secured

☐ Statutory lien (such as tax lien, mechanic's lien)

Nature of lien. Check all that apply.

☐ Judgment lien from a lawsuit

☐ Other (including a right to offset)

car loan)

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Who owes the debt? Check one.

 \square Check if this claim relates to a

☐ At least one of the debtors and another

Debtor 1 and Debtor 2 only

community debt

Write that number here:

■ Debtor 1 only

Debtor 2 only

Page 18 of 66 Document Fill in this information to identify your case: Debtor 1 **Terrell D Hanson** Middle Name First Name Last Name Debtor 2 First Name Middle Name Last Name (Spouse if, filing) United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) ☐ Check if this is an amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims Do any creditors have priority unsecured claims against you? ■ No. Go to Part 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) **Total claim** Priority Nonpriority amount amount 2.1 \$0.00 **IL Dept of Employment** Last 4 digits of account number 9524 Unknown \$0.00 Priority Creditor's Name When was the debt incurred? 2010 3033 S State St 10th Floor Chicago, IL 60603 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only ■ Domestic support obligations ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Taxes and certain other debts you owe the government ☐ Claims for death or personal injury while you were intoxicated Is the claim subject to offset? ■ No Other. Specify

☐ Yes

overpayment of unemployment

Debtor 1 Terrell D Hanson

Document Page 19 of 66
Case number (if know)

| 2.2 IL dept of Revenue | Last 4 digits of account number | 9524 | \$3,000.00 | \$0.00 | \$3,000.00 |
|--|------------------------------------|---|------------------|------------|------------|
| Priority Creditor's Name | When was the debt incurred? | 2013 | | | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all | that apply | | |
| ■ Debtor 1 only | ☐ Unliquidated | | | | |
| Debtor 2 only | ☐ Disputed | | | | |
| Debtor 1 and Debtor 2 only | Type of PRIORITY unsecured cla | aim: | | | |
| ☐ At least one of the debtors and another | ☐ Domestic support obligations | | | | |
| ☐ Check if this claim is for a community debt | Taxes and certain other debts | you owe the ac | overnment | | |
| Is the claim subject to offset? | ☐ Claims for death or personal in | | | | |
| ■ No | Other. Specify | , | | | |
| Yes | | | | | |
| 2.3 IRS | Last 4 digits of account number | 9524 | \$6,939.60 | \$6,939.60 | \$0.00 |
| Priority Creditor's Name Department of the Treasury Kansas City, MO 64999-0030 | When was the debt incurred? | 2015 | | | |
| Number Street City State Zlp Code | As of the date you file, the claim | is: Check all | that apply | | |
| Who incurred the debt? Check one. | ☐ Contingent | | | | |
| Debtor 1 only | ☐ Unliquidated | | | | |
| ☐ Debtor 2 only | ☐ Disputed | | | | |
| ☐ Debtor 1 and Debtor 2 only | Type of PRIORITY unsecured cla | aim: | | | |
| ☐ At least one of the debtors and another | ☐ Domestic support obligations | | | | |
| ☐ Check if this claim is for a community debt | Taxes and certain other debts | you owe the go | overnment | | |
| Is the claim subject to offset? | Claims for death or personal in | jury while you | were intoxicated | | |
| ■ No | ☐ Other. Specify | | | | |
| ☐ Yes | Tax Debt | | | | |
| 2.4 IRS | Last 4 digits of account number | 9524 | \$4,273.44 | \$0.00 | \$4,273.44 |
| Priority Creditor's Name | When was the debt incurred? | 2010 | | | |
| Austin, TX 73301-0010 | mon was the dost mountain. | 2010 | | | |
| Number Street City State ZIp Code | As of the date you file, the claim | is: Check all | that apply | | |
| Who incurred the debt? Check one. | ☐ Contingent | | | | |
| Debtor 1 only | ☐ Unliquidated | | | | |
| ☐ Debtor 2 only | ☐ Disputed | | | | |
| ☐ Debtor 1 and Debtor 2 only | Type of PRIORITY unsecured cla | aim: | | | |
| \square At least one of the debtors and another | ☐ Domestic support obligations | | | | |
| ☐ Check if this claim is for a community debt | ■ Taxes and certain other debts | you owe the go | overnment | | |
| Is the claim subject to offset? | Claims for death or personal in | jury while you | were intoxicated | | |
| ■ No | Other. Specify | | | | |
| Yes | | | | , | |

Case 17-80017 Doc 1 Filed 01/04/17 Entered 01/04/17 16:39:01 Desc Main Document Page 20 of 66

| Debt | or 1 Terrell D Hanson | | Case n | number (if know) | | |
|---------|---|--|----------------|----------------------------------|----------------------|----------------|
| 2.5 | IRS Priority Creditor's Name | Last 4 digits of account number | 9524 | \$2,369.00 | \$0.00 | \$2,369.00 |
| | PO Box 802501 Cincinnati, OH 45208-2501 | When was the debt incurred? | 2013 | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim | is: Check all | I that apply | | |
| | Who incurred the debt? Check one. | ☐ Contingent | | | | |
| | ■ Debtor 1 only | ☐ Unliquidated | | | | |
| | ☐ Debtor 2 only | ☐ Disputed | | | | |
| | ☐ Debtor 1 and Debtor 2 only | Type of PRIORITY unsecured cla | im: | | | |
| | ☐ At least one of the debtors and another | ☐ Domestic support obligations | | | | |
| | ☐ Check if this claim is for a community debt | Taxes and certain other debts y | ou owe the | government | | |
| | Is the claim subject to offset? | Claims for death or personal inj | - | | | |
| | ■ No | ☐ Other. Specify | | | | |
| | ☐ Yes | Tax debt | | | | |
| Part | 2: List All of Your NONPRIORITY Unsecu | ıred Claims | | | | |
| 3. D | Oo any creditors have nonpriority unsecured claim | ns against you? | | | | |
| г | ☐ No. You have nothing to report in this part. Submit | this form to the court with your others | chedules | | | |
| | Yes. | and form to the court manyour care. | onoduloo. | | | |
| u th | ist all of your nonpriority unsecured claims in the insecured claim, list the creditor separately for each c nan one creditor holds a particular claim, list the other Part 2. | laim. For each claim listed, identify wh | at type of cla | aim it is. Do not list claims al | Iready included in P | art 1. If more |
| | | | | | Total cl | aim |
| 4.1 | Acceptance Now | Last 4 digits of account numb | er 0683 | | | Unknown |
| , | Nonpriority Creditor's Name | _ | | 1.00//.0 | | |
| | 5501 Headquarters Dr Plano, TX 75024 | When was the debt incurred? | Oper | ned 09/12 | | |
| | Number Street City State Zlp Code | As of the date you file, the cla | m is: Check | all that apply | | |
| | Who incurred the debt? Check one. | | | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsect | ıred claim: | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | |
| | debt | Obligations arising out of a s | eparation ag | reement or divorce that you | did not | |
| | Is the claim subject to offset? | report as priority claims | orion plant | and ather similar debt- | | |
| | ■ No | ☐ Debts to pension or profit-sh | 01 | | | |
| | ☐ Yes | ■ Other Specify Rental A | greement | t | | |

Case 17-80017 Doc 1 Filed 01/04/17 Entered 01/04/17 16:39:01 Desc Main Document Page 21 of 66

Debtor 1 Terrell D Hanson Case number (if know) 4.2 **American Commenity Bank** Last 4 digits of account number \$2,781.00 Nonpriority Creditor's Name PO Box 182789 When was the debt incurred? 2014 Columbus, OH Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify credit card 4.3 AmeriCash Loans, L.L.C. Last 4 digits of account number Unknown Nonpriority Creditor's Name 880 Lee St, Ste 203 When was the debt incurred? 2016 Des Plaines, IL 60016 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Loan Other. Specify 4.4 Ashleys IRAC Last 4 digits of account number Unknown Nonpriority Creditor's Name 7131 E State St When was the debt incurred? Rockford, IL 61108 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify rent to own ☐ Yes

Case 17-80017 Doc 1 Filed 01/04/17 Entered 01/04/17 16:39:01 Desc Main Document Page 22 of 66

Debtor 1 Terrell D Hanson Case number (if know) 4.5 **Barclays Bank Delaware** Last 4 digits of account number 3359 Unknown Nonpriority Creditor's Name Opened 2/02/09 Last Active Po Box 8803 When was the debt incurred? 1/13/14 Wilmington, DE 19899 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes Barrick SwitzerLong Balsley Van \$1.531.98 4.6 Eve Last 4 digits of account number Nonpriority Creditor's Name 6833 Stalter Dr When was the debt incurred? 2014 Rockford, IL 61108 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $oxed{\square}$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No lacksquare Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Chapter 13 filing for another matter Other. Specify 4.7 Capital One, N.a. Last 4 digits of account number 1392 Unknown Nonpriority Creditor's Name Opened 10/07 Last Active Po Box 30273 When was the debt incurred? 8/08/08 Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Note Loan

Case 17-80017 Entered 01/04/17 16:39:01 Doc 1 Filed 01/04/17 Desc Main

Document Page 23 of 66 Debtor 1 Terrell D Hanson Case number (if know) 4.8 Capital One, N.a. Last 4 digits of account number 8392 \$2.000.00 Nonpriority Creditor's Name Opened 08/08 Last Active Po Box 30273 When was the debt incurred? 2/21/12 Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Unsecured Other, Specify 4.9 **Chase Auto** Last 4 digits of account number 4307 Unknown Nonpriority Creditor's Name Opened 04/06 Last Active P.o. Box 901003 When was the debt incurred? 12/21/12 Fort Worth, TX 76101 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Automobile ☐ Yes 4.1 Chase Bank 7556 \$990.30 Last 4 digits of account number Nonpriority Creditor's Name 4425 Harrison Ave When was the debt incurred? 2016 Rockford, IL 61108 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community

debt

■ No ☐ Yes report as priority claims

Other. Specify misc

 \square Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

Document Page 24 of 66 Debtor 1 Terrell D Hanson Case number (if know) 4.1 **Cheryl Meardle** Unknown Last 4 digits of account number Nonpriority Creditor's Name **Common Boundary Wellness** When was the debt incurred? 2013 4873 Manhattan Dr Rockford, IL 61108 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only □ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.1 Chicago lake Shore Hospital 8906 \$292.25 Last 4 digits of account number 2 Nonpriority Creditor's Name 4840 N Marine Dr When was the debt incurred? 2016 Chicago, IL 60640 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Medical 4.1 City of Belvidere Water 0005 \$71.16 Last 4 digits of account number Nonpriority Creditor's Name 401 Whitney Blvd When was the debt incurred? 2016 Belvidere, IL 61008 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another

debt

■ No ☐ Yes ☐ Student loans

report as priority claims

■ Other. Specify Utility

 $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

☐ Check if this claim is for a community

Is the claim subject to offset?

Document Page 25 of 66 Debtor 1 Terrell D Hanson Case number (if know) 4.1 0488 \$392.13 Comcast Last 4 digits of account number 4 Nonpriority Creditor's Name PO Box 3001 When was the debt incurred? Southeastern, PA 19398-3001 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only □ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Service ☐ Yes 4.1 Comenity Bank/american 4025 Unknown Last 4 digits of account number Nonpriority Creditor's Name Opened 5/29/01 Last Active Po Box 182789 When was the debt incurred? 10/11/13 Columbus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only □ Contingent ☐ Unliquidated Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes 4.1 Commonwealth Edison 7158 \$1,045.57 Last 4 digits of account number 6 Nonpriority Creditor's Name PO Box 6111 When was the debt incurred? 2015 Carol Stream, IL 60197-6111 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ No

☐ Yes

■ Other. Specify Utility

Debts to pension or profit-sharing plans, and other similar debts

Document Page 26 of 66 Debtor 1 Terrell D Hanson Case number (if know) 4.1 Commonwealth Edison 6151 \$258.70 Last 4 digits of account number Nonpriority Creditor's Name PO Box 6111 When was the debt incurred? 2016 Carol Stream, IL 60197-6111 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only □ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Utility 4.1 Credit First N A 6784 \$923.00 Last 4 digits of account number 8 Nonpriority Creditor's Name Opened 06/13 Last Active 6275 Eastland Rd When was the debt incurred? 10/25/13 Brookpark, OH 44142 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only □ Contingent ☐ Unliquidated Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes 4.1 Credit One Bank Na 1758 \$1,361.00 Last 4 digits of account number 9 Nonpriority Creditor's Name Opened 10/14/07 Last Active Po Box 98872 When was the debt incurred? 12/22/13 Las Vegas, NV 89193 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ No
□ Yes

Other. Specify

☐ Debts to pension or profit-sharing plans, and other similar debts

Credit Card

Case 17-80017 Doc 1 Filed 01/04/17 Entered 01/04/17 16:39:01 Desc Main Document Page 27 of 66 Debtor 1 Terrell D Hanson Case number (if know) 4.2 **Creditors Protection Service** Unknown Last 4 digits of account number 0 Nonpriority Creditor's Name 202 W. State Street When was the debt incurred? Ste 300 Rockford, IL 61101 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only □ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify medical 4.2 Dr. Curt Degner \$307.60 Last 4 digits of account number Nonpriority Creditor's Name 502 Logan Ave When was the debt incurred? 2017 Belvidere, IL 61008 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Dental 4.2 **Dsnb Macvs** 2410 \$1,222,00 Last 4 digits of account number Nonpriority Creditor's Name Opened 5/01/01 Last Active

Po Box 8218 When was the debt incurred? 10/03/13 Mason, OH 45040 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply

Who incurred the debt? Check one. ■ Debtor 1 only

☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans

☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Charge Account

debt

Case 17-80017 Doc 1 Filed 01/04/17 Entered 01/04/17 16:39:01 Desc Main Document Page 28 of 66

Debtor 1 Terrell D Hanson Case number (if know) 4.2 Fed Loan 9524 \$49,131.55 Last 4 digits of account number 3 Nonpriority Creditor's Name PO Box 69184 When was the debt incurred? 1991 Harrisburg, PA 17106-9184 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only □ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Student Loan ☐ Yes 4.2 First Community Cu Of 8500 \$4,095.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 11/25/13 Last Active 1702 Park Ave When was the debt incurred? 5/07/14 **Beloit, WI 53511** Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only □ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Automobile Other. Specify 4.2 **Glenwood Center** 4282 Unknown Last 4 digits of account number 5 Nonpriority Creditor's Name 2823 Glenwood Avenue When was the debt incurred? Rockford, IL 61101-3599 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Counseling

Case 17-80017 Doc 1 Filed 01/04/17 Entered 01/04/17 16:39:01 Desc Main Document Page 29 of 66

Debtor 1 Terrell D Hanson Case number (if know) 4.2 IL Dept of Security 9524 Unknown Last 4 digits of account number 6 Nonpriority Creditor's Name PO Box 19286 When was the debt incurred? 2010 Springfield, IL 62794-9286 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only □ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Overpayment of unemployment ☐ Yes 4.2 **Juniper Card Services** \$375.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 8801 When was the debt incurred? 2014 Wilmington, DE 19899-8801 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify credit card ☐ Yes 4.2 Karvn Martin Bohl \$130.00 Last 4 digits of account number 8 Nonpriority Creditor's Name 1201 S Phleps Ave, Ste 812 When was the debt incurred? Rockford, IL 61108 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify counseling

Document Page 30 of 66 Debtor 1 Terrell D Hanson Case number (if know) 4.2 \$701.00 Laura Hunt, Attorney Last 4 digits of account number 9 Nonpriority Creditor's Name 815 N Church St When was the debt incurred? 2013 Rockford, IL 61103 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only □ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Guardian Adlitem ☐ Yes 4.3 Miramedra 3491 \$191.00 Last 4 digits of account number 0 Nonpriority Creditor's Name 991 Oak Creek Dr When was the debt incurred? Lombard, IL 60148 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Rockford Health Physicians ☐ Yes 4.3 Miramedra 2782 \$150.00 Last 4 digits of account number Nonpriority Creditor's Name 991 Oak Creek Dr When was the debt incurred? Lombard, IL 60148 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community

debt

■ No

☐ Yes

Is the claim subject to offset?

report as priority claims

 $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify Rockford Health Physicians

Case 17-80017 Doc 1 Filed 01/04/17 Entered 01/04/17 16:39:01 Desc Main Document Page 31 of 66

Debtor 1 Terrell D Hanson Case number (if know) 4.3 Miramedrg 9559 \$148.00 Last 4 digits of account number 2 Nonpriority Creditor's Name 991 Oak Creek Dr When was the debt incurred? Lombard, IL 60148 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only □ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Rockford Health Physicians ☐ Yes 4.3 Miramedra 1644 \$111.00 Last 4 digits of account number 3 Nonpriority Creditor's Name 991 Oak Creek Dr When was the debt incurred? Lombard, IL 60148 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Rockford Health Physicians ☐ Yes 4.3 Miramedra 3011 \$52.00 Last 4 digits of account number Nonpriority Creditor's Name 991 Oak Creek Dr When was the debt incurred? Lombard, IL 60148 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

■ Other. Specify Rockford Health Physicians

Entered 01/04/17 16:39:01 Case 17-80017 Doc 1 Filed 01/04/17 Desc Main

Document Page 32 of 66 Debtor 1 Terrell D Hanson Case number (if know) 4.3 Montessori Private Academy Unknown Last 4 digits of account number 5 Nonpriority Creditor's Name 8101 Sayer Road When was the debt incurred? 2013 Rockford, IL 61108 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only □ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Tuition 4.3 **Navient** 0915 Unknown Last 4 digits of account number 6 Nonpriority Creditor's Name Opened 02/99 Last Active Po Box 9500 When was the debt incurred? 11/09/16 Wilkes Barre, PA 18773 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ☐ Other. Specify **Educational** 4.3 **Nelnet Lns** 8424 Unknown Last 4 digits of account number Nonpriority Creditor's Name Opened 12/98 Last Active Po Box 1649 When was the debt incurred? 6/26/13 **Denver, CO 80201** Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed

Document Page 33 of 66 Debtor 1 Terrell D Hanson Case number (if know) 4.3 **Nelnet Lns** 8524 Unknown Last 4 digits of account number 8 Nonpriority Creditor's Name Opened 12/98 Last Active Po Box 1649 When was the debt incurred? 6/26/13 **Denver, CO 80201** Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ☐ Other. Specify Educational 4.3 \$475.09 **Nicor Gas** 0636 Last 4 digits of account number 9 Nonpriority Creditor's Name 4651 Linden Road 2016 When was the debt incurred? Rockford, IL 61109 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Utility 4.4 **Northwest Credit Collectors** Unknown Last 4 digits of account number Nonpriority Creditor's Name 245 Main St When was the debt incurred? Scranton, PA 18519-1641 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another

debt

■ No

☐ Yes

☐ Student loans

report as priority claims

■ Other. Specify Collection debt

 \square Obligations arising out of a separation agreement or divorce that you did not

☐ Debts to pension or profit-sharing plans, and other similar debts

☐ Check if this claim is for a community

Is the claim subject to offset?

Entered 01/04/17 16:39:01 Case 17-80017 Doc 1 Filed 01/04/17 Desc Main

Document Page 34 of 66 Debtor 1 Terrell D Hanson Case number (if know) 4.4 **PCN Bank National Association** 9524 \$76,322.00 Last 4 digits of account number Nonpriority Creditor's Name 15W030 N Frontage Road, Ste 100 When was the debt incurred? Willowbrook, IL 60527 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only □ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Foreclosure ☐ Yes 4.4 **Personal Finance** 4601 \$2,547.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 09/13 Last Active 270 N Myulford Road, Ste 141 When was the debt incurred? 1/31/14 Rockford, IL 61107 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only □ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Household Goods Secured** 4.4 Personal Finance/p326 0901 Unknown Last 4 digits of account number 3 Nonpriority Creditor's Name Opened 4/11/13 Last Active When was the debt incurred? 9/06/13 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another

debt

■ No

☐ Yes

report as priority claims

☐ Obligations arising out of a separation agreement or divorce that you did not

☐ Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify Household Goods Secured

☐ Check if this claim is for a community

Is the claim subject to offset?

Entered 01/04/17 16:39:01 Case 17-80017 Doc 1 Filed 01/04/17 Desc Main Document Page 35 of 66

Debtor 1 Terrell D Hanson Case number (if know) 4.4 Personal Finance/p326 3701 Unknown Last 4 digits of account number 4 Nonpriority Creditor's Name Opened 12/12 Last Active When was the debt incurred? 4/11/13 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Household Goods Secured ☐ Yes 4.4 Personal Finance/p326 8301 Unknown Last 4 digits of account number 5 Nonpriority Creditor's Name Opened 8/07/12 Last Active When was the debt incurred? 12/04/12 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Unsecured Other, Specify 4.4 Pnc Mortgage 4404 \$71,624.00 Last 4 digits of account number 6 Nonpriority Creditor's Name Opened 09/02 Last Active Po Box 8703 When was the debt incurred? 7/01/13 Dayton, OH 45401 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only □ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify FHA Real Estate Mortgage

☐ Yes

Case 17-80017 Doc 1 Filed 01/04/17 Entered 01/04/17 16:39:01 Desc Main Document Page 36 of 66

Debtor 1 Terrell D Hanson Case number (if know) **Portfolio Recovery Ass** 8663 \$2,191.00 Last 4 digits of account number Nonpriority Creditor's Name 120 Corporate Blvd Ste 1 When was the debt incurred? **Opened 05/14** Norfolk, VA 23502 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only □ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No **Factoring Company Account Capital One** ☐ Yes Other. Specify 4.4 **Pumilia Family Dental** 4390 Unknown Last 4 digits of account number Nonpriority Creditor's Name 755 S Mulford Road When was the debt incurred? 2016 Rockford, IL 61108 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Dental Other. Specify **Rockford Health Physicians** A395 \$60.00 Last 4 digits of account number Nonpriority Creditor's Name **Dept 4701** When was the debt incurred? 2016 Carol Stream, IL 60122-4701 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify medical

Case 17-80017 Doc 1 Filed 01/04/17 Entered 01/04/17 16:39:01 Desc Main Document Page 37 of 66

Debtor 1 Terrell D Hanson Case number (if know) 4.5 **Rockford Memorial Hopital** 4457 \$971.15 Last 4 digits of account number 0 Nonpriority Creditor's Name **Dept 4628** When was the debt incurred? 2016 Carol Stream, IL 60122 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical ☐ Yes 4.5 2434 **Rockford Memorial Hopital** \$87,702.38 Last 4 digits of account number Nonpriority Creditor's Name 2400 N Rockton Ave When was the debt incurred? Rockford, IL 61103 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other Specify Medical ☐ Yes 4.5 Steven Whitmore Attorney Unknown Last 4 digits of account number Nonpriority Creditor's Name Law Offices of Shriver, Oneill & Th 2013 When was the debt incurred? 515 N Court St Rockford, IL 61103 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Divorce fees ☐ Yes

Case 17-80017 Doc 1 Filed 01/04/17 Entered 01/04/17 16:39:01 Desc Main Document Page 38 of 66

| Debt | or 1 Terrell D Hanson | | Case number (if know) | | | | | |
|----------|--|--|--|----------|--|--|--|--|
| 4.5 3 | The Student Loan Help Center | Last 4 digits of account number | 9524 | Unknown | | | | |
| | Nonpriority Creditor's Name Accounting Dept 2660 Cypress Ridge Blvd, Ste 101 Wesley Chapel, FL 33544 | When was the debt incurred? | 2016 | | | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | | | | | | |
| | Debtor 1 only | ☐ Contingent | | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | | | | | |
| | ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | | | | | |
| | Yes | Other. Specify public serv | ice loan forgiveness | | | | | |
| 4.5 4 | Transworld Systems | Last 4 digits of account number | 2174 | \$107.90 | | | | |
| | Nonpriority Creditor's Name 500 virginia Dr, Ste 514 Fort Washington, PA 19034 | When was the debt incurred? | 2016 | | | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | | | | | |
| | Debtor 1 only | ☐ Contingent | | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | _ | | | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | | | | | | |
| | ■ No | ☐ Debts to pension or profit-sharin | g plans, and other similar debts | | | | | |
| | Yes | Other. Specify Lawn Care | | | | | | |
| 4.5 5 | Verizon Wireless | Last 4 digits of account number | 3354 | \$535.72 | | | | |
| <u> </u> | Nonpriority Creditor's Name P>O> Box 25505 | When was the debt incurred? | 2016 | | | | | |
| | Lehigh Valley, PA 18002-5505 | | e. Charle all that apply | | | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Спеск ан тлат аррну | | | | | |
| | Debtor 1 only | ☐ Contingent | | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | | | |
| | ☐ Check if this claim is for a community debt | | ration agreement or divorce that you did not | | | | | |
| | Is the claim subject to offset? | report as priority claims Debts to pension or profit-sharing plans, and other similar debts | | | | | | |
| | ■ No | | g plans, and other similar debts | | | | | |
| | Yes | Other. Specify Service | | | | | | |

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Entered 01/04/17 16:39:01 Desc Main Case 17-80017 Doc 1 Filed 01/04/17 Page 39 of 66 Case number (if know) Document

Debtor 1 Terrell D Hanson

Name and Address **IL Dept of Security** PO Box 19286 3033 S State Street 10th Floor Chicago, IL 60603

On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.26 of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

■ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | Total Claim |
|--------------|-----|---|-----|------------------|
| | 6a. | Domestic support obligations | 6a. | \$ 0.00 |
| Total claims | | | | |
| from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ 16,582.04 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ 16,582.04 |
| | | | | Total Claim |
| | 6f. | Student loans | 6f. | \$ 0.00 |
| Total claims | | | | |
| from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ 310,797.48 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ 310,797.48 |

Case 17-80017 Doc 1 Filed 01/04/17 Entered 01/04/17 16:39:01 Desc Main

| | | Docume | 11L 1 auc 40 01 00 | |
|------------------------|--------------------------|-------------------|--------------------|--|
| Fill in this infor | rmation to identify your | case: | | |
| Debtor 1 | Terrell D Hanson | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States B | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number (if known) | | | | |
| | | | | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or | company wit Name, Numb | h whom you have the o | contract or lease | State what the contract or lease is for |
|-----|-----------|---------------------------|-----------------------|-------------------|---|
| 2.1 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | - |
| 2.2 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.3 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.4 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.5 | | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| | | | | | |

Case 17-80017 Doc 1 Filed 01/04/17 Entered 01/04/17 16:39:01 Desc Main

| | | Docume | nt <u>Pade 41 or</u> | 66 |
|---|---|---|--|---|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Terrell D Hanson | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number (if known) | | | | ☐ Check if this is an amended filing |
| | orm 106H • H: Your Code | ebtors | | 12/15 |
| people are filing ill it out, and nu our name and | rogether, both are equal simber the entries in the case number (if known) | ally responsible for suppl | lying correct informatio the Additional Page to | complete and accurate as possible. If two married on. If more space is needed, copy the Additional Page, this page. On the top of any Additional Pages, write s a codebtor. |
| 2. Within th | | lived in a community pro Nevada, New Mexico, Pue | | ? (Community property states and territories include gton, and Wisconsin.) |
| ■ No. Go to | | ise, or legal equivalent live | with you at the time? | |
| in line 2 ag | ain as a codebtor only i), Schedule E/F (Official | f that person is a guarant | or or cosigner. Make su | f your spouse is filing with you. List the person shown ure you have listed the creditor on Schedule D (Official G). Use Schedule D, Schedule E/F, or Schedule G to fill |
| | nn 1: Your codebtor Number, Street, City, State and ZI | P Code | | Column 2: The creditor to whom you owe the debt Check all schedules that apply: |
| 2615 | Quinetta Y Harrington Pelham Road ford, IL 61103 | -Robinson | | ☐ Schedule D, line ■ Schedule E/F, line ☐ Schedule G Pnc Mortgage |

Case 17-80017 Doc 1 Filed 01/04/17 Entered 01/04/17 16:39:01 Desc Main Document Page 42 of 66

| Fill | in this information to identify | y your ca | se: | | | | | | | |
|--------------------|--|--------------------------------------|------------------------------|-------------------------------------|------------------------------|----------------|--------------------------------|------------------------------|----------------------------------|-----------------|
| Del | otor 1 Terre | II D Han | son | | | | | | | |
| | otor 2 ouse, if filing) | | | | | | | | | |
| Uni | ted States Bankruptcy Cour | rt for the: | NORTHERN DISTRIC | T OF ILLINOIS | | | | | | |
| (If kr | se number | | | | | | ☐ A supp | ended filing lement show | ing postpetition following date: | chapter |
| 0 | fficial Form 106 | <u> </u> | | | | | MM / E | DD/ YYYY | | |
| S | chedule I: Your | r Inco | me | | | | | | | 12/15 |
| sup spo atta | as complete and accurate plying correct information use. If you are separated a ch a separate sheet to this Describe Emplo | n. If you a and your s form. O | re married and not filing wi | ng jointly, and y th you, do not | your spouse include infor | is liv mati | ring with you, on about you | include info spouse. If n | rmation about nore space is | your needed, |
| 1. | Fill in your employment information. | | | Debtor 1 | | | Deb | tor 2 or non- | -filing spouse | |
| | If you have more than one attach a separate page wi | | Employment status | ■ Employed | | | ■ 6 | mployed | | |
| | information about addition | | p.c.y | ☐ Not employed | | | | lot employed | | |
| | employers. | | Occupation | Deputy Superintendant | | | | | | |
| | Include part-time, seasona self-employed work. | al, or | Employer's name | Rock Coun | ty, WI | | | | | |
| | Occupation may include s or homemaker, if it applies | | Employer's address | 51 S Main S Janesville, | | | | | | |
| | | | How long employed to | here? 6 y | vrs . | | | | | |
| Par | t 2: Give Details Ab | out Mont | hly Income | | | | | | | |
| | mate monthly income as our separate | | e you file this form. If | you have nothing | g to report for | any | line, write \$0 ir | the space. I | nclude your nor | n-filing |
| | u or your non-filing spouse e space, attach a separate s | | | ombine the inform | mation for all | empl | oyers for that p | erson on the | lines below. If y | ou need |
| | | | | | | | For Debtor 1 | | ebtor 2 or iling spouse | |
| 2. | List monthly gross wage deductions). If not paid m | | | | e. 2. | \$ | 5,145. | 00 \$ | 0.00 | |
| 3. | Estimate and list month | ly overtir | ne pay. | | 3. | +\$ | 0. | 00 +\$ | 0.00 | |

Official Form 106I Schedule I: Your Income page 1

5,145.00

0.00

Calculate gross Income. Add line 2 + line 3.

Case 17-80017 Doc 1 Filed 01/04/17 Entered 01/04/17 16:39:01 Desc Main Document Page 43 of 66

| Deb | otor 1 | Terrell D Hanson | | | Case | e number (if known) | _ | | | | |
|-----|---------------|--|----------|-----------|------------|---------------------|------------|------------------|--------------|---------------------------|--|
| | | | | | Fo | r Debtor 1 | | For Deb | | | |
| | Сор | y line 4 here | 4. | | \$_ | 5,145.00 | | \$ | .5 -1 | 0.00 | |
| 5. | List | all payroll deductions: | | | | | | | | | |
| ٠. | 5a. | Tax, Medicare, and Social Security deductions | 58 | a. | \$ | 616.00 | | \$ | | 0.00 |) |
| | 5b. | Mandatory contributions for retirement plans | 5k | | \$- | 338.00 | - | \$ | | 0.00 | |
| | 5c. | Voluntary contributions for retirement plans | 50 | | \$ | 0.00 | | \$ | | 0.00 | _ |
| | 5d. | Required repayments of retirement fund loans | 50 | d. | \$ | 0.00 | - | \$ | | 0.00 | _ |
| | 5e. | Insurance | 56 | Э. | \$ | 224.00 | • | \$ | | 0.00 | <u> </u> |
| | 5f. | Domestic support obligations | 5f | | \$ | 625.00 | - | \$ | | 0.00 | - |
| | 5g. | Union dues | 50 | g. | \$ | 0.00 | - | \$ | | 0.00 |) |
| | 5h. | Other deductions. Specify: | _ 5h | า.+ | \$_ | 0.00 | + | \$ | | 0.00 |) |
| 6. | Add | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | | \$_ | 1,803.00 | | \$ | | 0.00 |) |
| 7. | Cald | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | | \$_ | 3,342.00 | _ | \$ | | 0.00 |) |
| 8. | List 8a. | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total | | | | | | • | | | |
| | O.L. | monthly net income. | 88 | | \$_ | 0.00 | | \$ | | 0.00 | |
| | 8b. 8c. | Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce | 8k | | \$_ | 0.00 | - | · | | 0.00 | _ |
| | 0.1 | settlement, and property settlement. | 80 | | \$_ | 0.00 | | \$ | | 0.00 | |
| | 8d. 8e. | Unemployment compensation Social Security | 80 86 | | \$_ \$ | 0.00 | - | \$ | 4 (| 0.00 0.00 0 | _ |
| | 8f. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income | 8f | : | \$_ \$_ | 0.00 | - | \$ | | 0.00 |) |
| | 8g. 8h. | Other monthly income. Specify: | 98 | յ. Դ.+ | | 0.00 | . + | \$ | | 0.00 | |
| | OH. | Other monthly moonie. Specify. | _ 01 | i.Ŧ | Ψ_ | 0.00 | . T 1 1 | Ψ | | 0.00 | <u>, </u> |
| 9. | Add | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | | \$ | 0.00 | | \$ | 1 | ,600.0 | 00 |
| 10. | Cald | culate monthly income. Add line 7 + line 9. | 10. | \$ | | 3,342.00 + \$ | | 1,600. | 00 | = \$ | 4.942.00 |
| | | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | | | | | | | | | .,0 .2.00 |
| 11. | Inclu othe | e all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your refriends or relatives. Not include any amounts already included in lines 2-10 or amounts that are not a cify: | dep | | | | • | d in <i>Sche</i> | edule 11. | | 0.00 |
| 12. | | the amount in the last column of line 10 to the amount in line 11. The rest is that amount on the Summary of Schedules and Statistical Summary of Certain ies | | | | | | f it | 12. | \$ | 4,942.00 |
| 13. | Doy | ou expect an increase or decrease within the year after you file this form? | ? | | | | | | | Comb month | ined Ily income |
| | | No. Yes Evnlain | | | | | | | | | |

Official Form 106I Schedule I: Your Income page 2

Case 17-80017 Doc 1 Filed 01/04/17 Entered 01/04/17 16:39:01 Desc Main Document Page 44 of 66

| Fill i | n this information | on to identify yo | our case: | | | | | |
|--------------|--|--------------------|----------------|---|--|----------------------------|---|---|
| Debt Debt | _ | Terrell D Har | nson | | | | ck if this is: An amended filing A supplement show 13 expenses as of | ving postpetition chapter |
| ` . | | otcy Court for the | · NORTH | IERN DISTRICT OF ILLIN | OIS | | MM / DD / YYYY | |
| Case | e number nown) | noy Court for the | · NOKII | | | | WINT, BB, TTTT | |
| Of | ficial For | m 106J | | | | • | | |
| Sc | chedule . | J: Your | Exper | ises | | | | 12/15 |
| info | | re space is ne | eded, atta | If two married people ar ch another sheet to this n. | | | | |
| Part | 1: Describ | e Your House | hold | | | | | |
| •• | ■ No. Go to li □ Yes. Does | ine 2. | in a separ | ate household? | | | | |
| | □ No □ Yes | s. Debtor 2 mus | st file Offici | al Form 106J-2, <i>Expen</i> ses | for Separate House | ehold of Deb | otor 2. | |
| 2. | Do you have | dependents? | ■ No | | | | | |
| | Do not list Deb Debtor 2. | otor 1 and | ☐ Yes. | Fill out this information for each dependent | Dependent's relation | | Dependent's age | Does dependent live with you? |
| | Do not state the | | | | | | | □ No □ Yes |
| | · | | | | | | | □ No |
| | | | | | | | | ☐ Yes ☐ No |
| | | | | | | | | ☐ Yes |
| | | | | | | | | □ No □ Yes |
| 3. | Do your expe | | | No | | | | □ res |
| | expenses of p yourself and y | | han $_{m 	au}$ | Yes | | | | |
| Esti exp | Estimate your expenses as of a colicable date. | enses as of ye | our bankrı | y Expenses uptcy filing date unless y y is filed. If this is a supp | ou are using this followed the second | orm as a su J, check tl | ipplement in a Cha ne box at the top o | apter 13 case to report f the form and fill in the |
| the | | assistance an | | government assistance i cluded it on <i>Schedule I:</i> Y | | | Your exp | enses |
| 4. | The rental or payments and | | | ses for your residence. In | nclude first mortgage | e 4. S | \$ | 0.00 |
| | If not included | d in line 4: | | | | | | |
| | 4a. Real est | tate taxes | | | | 4a. S | \$ | 359.00 |
| | | y, homeowner's | | | | 4b. 9 | | 0.00 |
| | | | | ıpkeep expenses dominium dues | | 4c. \$ 4d. \$ | | 200.00 0.00 |
| 5 | | | | our residence, such as ho | me equity loans | 5. 9 | · | 0.00 |

Case 17-80017 Doc 1 Filed 01/04/17 Entered 01/04/17 16:39:01 Desc Main Document Page 45 of 66

| Debtor 1 Terrell D Hans | son | Case num | ber (if known) | |
|--|--|-------------------|----------------|---------------------------------|
| 6. Utilities: | | | | |
| 6a. Electricity, heat, | natural gas | 6a. | \$ | 650.00 |
| 6b. Water, sewer, ga | _ | 6b. | | 121.00 |
| , , , | phone, Internet, satellite, and cable services | 6c. | | 533.00 |
| 6d. Other. Specify: | | 6d. | | 0.00 |
| 7. Food and housekeep | na supplies | 7. | · | 800.00 |
| B. Childcare and childre | | 8. | · | 82.00 |
| 9. Clothing, laundry, and | | 9. | | 100.00 |
| 10. Personal care produc | | 10. | | 200.00 |
| 1. Medical and dental ex | | 11. | · | 100.00 |
| | le gas, maintenance, bus or train fare. | 11. | Ψ | 100.00 |
| Do not include car payr | | 12. | \$ | 500.00 |
| | recreation, newspapers, magazines, and books | 13. | \$ | 300.00 |
| | ons and religious donations | 14. | | 80.00 |
| 5. Insurance. | | | | |
| | ce deducted from your pay or included in lines 4 or 20. | | | |
| 15a. Life insurance | | 15a. | \$ | 0.00 |
| 15b. Health insurance | • | 15b. | \$ | 0.00 |
| 15c. Vehicle insurance | e | 15c. | \$ | 71.00 |
| 15d. Other insurance. | Specify: | 15d. | · - | 0.00 |
| | taxes deducted from your pay or included in lines 4 or 20. | | | 0.00 |
| Specify: past due ta | | 16. | \$ | 162.00 |
| 7. Installment or lease p | | | · — | |
| 17a. Car payments fo | | 17a. | \$ | 471.00 |
| 17b. Car payments fo | | 17b. | \$ | 0.00 |
| 17c. Other. Specify: | | 17c. | \$ | 0.00 |
| 17d. Other. Specify: | | 17d. | | 0.00 |
| | nony, maintenance, and support that you did not repo | | Ť ——— | |
| | ay on line 5, Schedule I, Your Income (Official Form 1 | | \$ | 0.00 |
| 9. Other payments you i | make to support others who do not live with you. | • | \$ | 0.00 |
| Specify: | | 19. | | |
| | penses not included in lines 4 or 5 of this form or on | | | |
| 20a. Mortgages on ot | • • • | 20a. | · | 0.00 |
| 20b. Real estate taxes | 5 | 20b. | · | 0.00 |
| 20c. Property, homeo | wner's, or renter's insurance | 20c. | \$ | 0.00 |
| 20d. Maintenance, rep | pair, and upkeep expenses | 20d. | \$ | 0.00 |
| 20e. Homeowner's as | sociation or condominium dues | 20e. | \$ | 0.00 |
| 1. Other: Specify: Pay | ment to GAL from Divorce | 21. | +\$ | 100.00 |
| | | | | |
| 22. Calculate your month | | | • | 4 000 00 |
| 22a. Add lines 4 throug | | 61.0 | \$ | 4,829.00 |
| | hthly expenses for Debtor 2), if any, from Official Form 100 | oJ-2 | \$ | |
| 22c. Add line 22a and 2 | 22b. The result is your monthly expenses. | | \$ | 4,829.00 |
| 3. Calculate your month | ly net income | | | |
| | ur combined monthly income) from Schedule I. | 23a. | \$ | 4 042 00 |
| | nly expenses from line 22c above. | 23a. 23b. | · | 4,942.00 |
| 23b. Copy your montr | ny expenses from tine 220 above. | ∠30. | - э | 4,829.00 |
| 23c Subtract vour me | anthly expenses from your monthly income | | | |
| | onthly expenses from your monthly income. r monthly net income. | 23c. | \$ | 113.00 |
| The result is you | i monuny nacincoma. | _30. | · · | |
| 24. Do you expect an inci | ease or decrease in your expenses within the year af | ter you file this | s form? | |
| For example, do you expe | ct to finish paying for your car loan within the year or do you expe | | | crease or decrease because of a |
| modification to the terms of | f your mortgage? | | | |
| ■ No. | | | | |
| ☐ Yes. Expla | ain here: | | | |

Case 17-80017 Doc 1 Filed 01/04/17 Entered 01/04/17 16:39:01 Desc Main Document Page 46 of 66

| Fill in thi | is information to identify your | case: | | | |
|---------------|---|---------------------------|---|----------------------------------|---------------------------|
| Debtor 1 | Terrell D Hanson | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, f | filing) First Name | Middle Name | Last Name | | |
| United St | tates Bankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| Case nur | mber | | | | |
| (if known) | | | | | Check if this is an |
| | | | | | amended filing |
| | | | | | |
| Ott: -: - | I Farms 400Daa | | | | |
| | I Form 106Dec | | | | |
| Decl | aration About a | ın Individual | Debtor's Sc | hedules | 12/15 |
| | | | | | |
| If two ma | rried people are filing togethe | r, both are equally respo | onsible for supplying corr | ect information. | |
| You must | t file this form whenever you fi | le bankruptcy schedule: | s or amended schedules. | Making a false statement, cor | ncealing property, or |
| | money or property by fraud in | | kruptcy case can result i | n fines up to \$250,000, or impr | isonment for up to 20 |
| years, or | both. 18 U.S.C. §§ 152, 1341, 1 | 519, and 3571. | | | |
| | <u></u> | | | | |
| | Sign Below | | | | |
| Did | you pay or agree to pay some | eone who is NOT an atto | rnev to help vou fill out b | ankruptcy forms? | |
| | , , | | , | | |
| | No | | | | |
| | Yes. Name of person | | | | tition Preparer's Notice, |
| | | | | Declaration, and Signa | ature (Official Form 119) |
| | | | | | |
| | er penalty of perjury, I declare they are true and correct. | that I have read the sum | nmary and schedules filed | d with this declaration and | |
| Y | /s/ Terrell D Hanson | | X | | |
| | Terrell D Hanson | | Signature of | Debtor 2 | |
| | Signature of Debtor 1 | | 2.3 | | |
| | | | | | |
| | Date January 4, 2017 | | Date | | |

Case 17-80017 Doc 1 Filed 01/04/17 Entered 01/04/17 16:39:01 Desc Main Document Page 47 of 66

| Fill in t | his information to identify yo | ur case: | | | |
|------------|--|--|-------------------------------------|---|---------------------------------|
| Debtor | | · · · · · · · · · · · · · · · · · · · | | | |
| Debtor | First Name | Middle Name | Last Name | | |
| (Spouse i | | Middle Name | Last Name | | |
| United | States Bankruptcy Court for the | : NORTHERN DISTRICT (| OF ILLINOIS | | |
| Case n | umber | | | | |
| (if known) | | | | - | Check if this is an |
| | | | | a | mended filing |
| O.(;; | | | | | |
| | ial Form 107 | | | | |
| State | ement of Financial | Affairs for Individ | duals Filing for E | sankruptcy | 4/16 |
| | omplete and accurate as pos- ition. If more space is needed | | | | |
| | r (if known). Answer every qu | | and form. On the top of the | y additional pages, write you | ar name and base |
| Part 1: | Give Details About Your N | larital Status and Where You | Lived Before | | |
| 1. Wł | nat is your current marital sta | tus? | | | |
| | iat io your our one maritar ora | | | | |
| _ | Married Not married | | | | |
| Ц | | | | | |
| 2. Du | ring the last 3 years, have you | u lived anywhere other than | where you live now? | | |
| | No | | | | |
| | Yes. List all of the places you | lived in the last 3 years. Do no | ot include where you live nov | <i>V</i> . | |
| De | ebtor 1 Prior Address: | Dates Debtor 1 | Debtor 2 Prior Ad | Idress: | Dates Debtor 2 |
| 68 | 365 Wildlife Dr | lived there From-To: | ☐ Same as Debtor | 1 | lived there ☐ Same as Debtor 1 |
| | tillman Valley, IL 61084 | 2014-April 20 | | I | From-To: |
| | | | | | |
| 2 \A/i- | thin the last 8 years, did you | over live with a chause or les | ral aquivalent in a commun | ity proporty state or torritor | 2 (Community proporty |
| | nd territories include Arizona, C | | | | |
| | No | | | | |
| | | chedule H: Your Codebtors (O | fficial Form 106H). | | |
| 5 40 | | | | | |
| Part 2 | Explain the Sources of Yo | ur Income | | | |
| | d you have any income from e | | | | ndar years? |
| | in the total amount of income you are filing a joint case and yo | | | | |
| | No | | | | |
| | Yes. Fill in the details. | | | | |
| _ | res. r in in the details. | | | | |
| | | Debtor 1 | Cross income | Debtor 2 | Cross income |
| | | Sources of income Check all that apply. | Gross income (before deductions and | Sources of income Check all that apply. | Gross income (before deductions |
| | | | exclusions) | | and exclusions) |
| | lanuary 1 of current year until te you filed for bankruptcy: | - wages, commissions, | \$2,371.00 | ☐ Wages, commissions, | |
| ine ual | e you med for ballkrupicy. | bonuses, tips | | bonuses, tips | |
| | | ☐ Operating a business | | ☐ Operating a business | |

Official Form 107

Case 17-80017 Doc 1 Filed 01/04/17 Entered 01/04/17 16:39:01 Desc Main Document Page 48 of 66 Debtor 1 Terrell D Hanson Case number (if known) Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For last calendar year: \$61,803.00 □ Wages, commissions, Wages, commissions, (January 1 to December 31, 2016) bonuses, tips bonuses, tips Operating a business ☐ Operating a business For the calendar year before that: \$54,917.00 ■ Wages, commissions, Wages, commissions, (January 1 to December 31, 2015) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income from** Sources of income **Gross income** Describe below. (before deductions each source Describe below. (before deductions and and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

| No. | | nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an for a personal, family, or household purpose." |
|-----|--------------------|---|
| | During the 90 days | s before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? |
| | ☐ No. Go to | line 7. |
| | ☐ Yes List be | elow each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you |

* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts.

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

No. Go to line 7.

☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Creditor's Name and Address Dates of payment Total amount Amount vou Was this payment for ... paid still owe

Case 17-80017 Doc 1 Filed 01/04/17 Entered 01/04/17 16:39:01 Desc Main

Page 49 of 66 Case number (if known) Document Debtor 1 Terrell D Hanson

| 7. | Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one fo a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. | | | | | |
|---|---|-------------------------|----------------------|----------------------|---|-----------------------------|
| | No☐ Yes. List all payments to an insider. | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for | this payment |
| 8. | Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos | | ments or transfer a | ny property on a | ccount of a de | ebt that benefited an |
| | No | | | | | |
| | Yes. List all payments to an insider | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for Include cred | this payment itor's name |
| Par | t 4: Identify Legal Actions, Repossession | ns, and Foreclosures | | | | |
| 9. | Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. | | | | | |
| | □ No | | | | | |
| | Yes. Fill in the details. | | | | | |
| | Case title Case number | Nature of the case | Court or agency | | Status of the | e case |
| | 16 SC 542 | | Knox County, I | I | ■ Pending □ On appe □ Conclude Being Sue | ed d for Car |
| | | | | | Accident D | Daughter was in |
| 10. | Within 1 year before you filed for bankrupt Check all that apply and fill in the details below ■ No. Go to line 11. □ Yes. Fill in the information below. | | erty repossessed, fo | oreclosed, garnis | shed, attached | l, seized, or levied? |
| | Creditor Name and Address | Describe the Property | | Date | | Value of the |
| | | Explain what happened | I | | | property |
| 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial ir accounts or refuse to make a payment because you owed a debt? ■ No □ Yes. Fill in the details. | | | ancial institution | ı, set off any a | mounts from your | |
| | Creditor Name and Address | Describe the action the | creditor took | Date taken | action was | Amount |
| 12. | Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a ■ No □ Yes | | erty in the possessi | on of an assigne | e for the bene | fit of creditors, a |

Entered 01/04/17 16:39:01 Desc Main Case 17-80017 Doc 1 Filed 01/04/17

Page 50 of 66 Case number (if known) Document Debtor 1 Terrell D Hanson

| Pai | tt 5: List Certain Gifts and Contributions | | | | | | |
|--|--|---|---|--------------------------|--|--|--|
| 13. | Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? ■ No □ Yes. Fill in the details for each gift. | | | | | | |
| | Gifts with a total value of more than \$600 per person | Describe the gifts | Dates you gave the gifts | Value | | | |
| | Person to Whom You Gave the Gift and Address: | | | | | | |
| 14. | Within 2 years before you filed for bankruptc: ■ No □ Yes. Fill in the details for each gift or contribution. | y, did you give any gifts or contributions with a tota | al value of more than | \$600 to any charity? | | | |
| | Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) | Describe what you contributed | Dates you contributed | Value | | | |
| Pai | rt 6: List Certain Losses | | | | | | |
| 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other or gambling? ■ No □ Yes. Fill in the details. | | | | t, fire, other disaster, | | | |
| | how the loss occurred | cribe any insurance coverage for the loss ude the amount that insurance has paid. List pending rance claims on line 33 of Schedule A/B: Property. | Date of your loss | Value of property lost | | | |
| Pai | rt 7: List Certain Payments or Transfers | | | | | | |
| 16. | Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. | | | | | | |
| | □ No | | | | | | |
| | Yes. Fill in the details. | | | | | | |
| | Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You | Description and value of any property transferred | Date payment or transfer was made | Amount of payment | | | |
| | Loves Park Legal Clinic 535 Loves Park Drive Loves Park, IL 61111 | Attorney Fees | 01/03/2017 | \$870.00 | | | |
| 17. | promised to help you deal with your creditors Do not include any payment or transfer that you | | or transfer any prope | rty to anyone who | | | |
| | □ No ■ Yes. Fill in the details. | | | | | | |
| | Person Who Was Paid Address | Description and value of any property transferred | Date payment or transfer was made | Amount of payment | | | |
| | Credit Counseling | fees | | \$50.00 | | | |

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not

Case 17-80017 Doc 1 Filed 01/04/17 Entered 01/04/17 16:39:01 Desc Main Page 51 of 66 Case number (if known) Document

Debtor 1 Terrell D Hanson

| | include gifts and transfers that you have alread ■ No □ Yes. Fill in the details. | y listed on this statemen | t. | | | |
|--|--|---|---------------------------|------------|---|---|
| | Person Who Received Transfer Address | Description and property transfer | | payme | be any property or ents received or debts n exchange | Date transfer was made |
| | Person's relationship to you | | | • | | |
| 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which y beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details. | | | | | of which you are a | |
| | Name of trust | Description and | value of the prop | erty trans | ferred | Date Transfer was |
| | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | | made |
| Par | t 8: List of Certain Financial Accounts, Ins | struments, Safe Deposi | it Boxes, and Sto | rage Units | s | |
| 20. | Within 1 year before you filed for bankruptc sold, moved, or transferred? Include checking, savings, money market, chouses, pension funds, cooperatives, associated in the second | or other financial accou | ints; certificates o | of deposit | | |
| | Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) | Last 4 digits of account number | Type of accour instrument | nt or | Date account was closed, sold, moved, or transferred | Last balance before closing or transfer |
| 21. | Do you now have, or did you have within 1 y cash, or other valuables? | ear before you filed fo | r bankruptcy, any | y safe dep | osit box or other depos | itory for securities, |
| | ■ No | | | | | |
| | Yes. Fill in the details. | | | | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had acc Address (Number, State and ZIP Code) | | Describe t | the contents | Do you still have it? |
| 22. | Have you stored property in a storage unit of | or place other than you | r home within 1 y | ear before | e you filed for bankrupto | cy? |
| | ■ No □ Yes. Fill in the details. | | | | | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or to it? Address (Number, State and ZIP Code) | | Describe t | the contents | Do you still have it? |
| Par | 19: Identify Property You Hold or Control | for Someone Else | | | | |
| 23. | Do you hold or control any property that so for someone. | meone else owns? Incl | ude any property | you borr | owed from, are storing f | or, or hold in trust |
| | NoYes. Fill in the details. | | | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the pro (Number, Street, City, Code) | | Describe t | the property | Value |
| | | | | | | |

Case 17-80017 Entered 01/04/17 16:39:01 Doc 1 Filed 01/04/17 Desc Main Page 52 of 66 Case number (if known) Document

Debtor 1 **Terrell D Hanson**

Part 10: Give Details About Environmental Information

| For | the purpose of Part 10, the following definitions | apply: | | | | | | |
|-----|---|---|---|--------------------|--|--|--|--|
| | Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. | | | | | | | |
| | Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. | | | | | | | |
| | | | | | | | | |
| Rep | ort all notices, releases, and proceedings that yo | ou know about, regardless of whe | n they occurred. | | | | | |
| 24. | Has any governmental unit notified you that you | u may be liable or potentially liable | e under or in violation of an environme | ental law? | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State an ZIP Code) | Environmental law, if you know it | Date of notice | | | | |
| 25. | Have you notified any governmental unit of any ■ No □ Yes. Fill in the details. | release of hazardous material? | | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State an ZIP Code) | Environmental law, if you know it | Date of notice | | | | |
| 26. | Have you been a party in any judicial or adminis | strative proceeding under any env | ironmental law? Include settlements a | and orders. | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | |
| | Case Title Case Number | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Nature of the case | Status of the case | | | | |
| Pai | tt 11: Give Details About Your Business or Con | nections to Any Business | | | | | | |
| 27. | Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? | | | | | | | |
| | ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time | | | | | | | |
| | ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) | | | | | | | |
| | ☐ A partner in a partnership | | | | | | | |
| | ☐ An officer, director, or managing execut | tive of a corporation | | | | | | |
| | ☐ An owner of at least 5% of the voting or equity securities of a corporation | | | | | | | |

Business Name Address

(Number, Street, City, State and ZIP Code)

Describe the nature of the business

Name of accountant or bookkeeper

No. None of the above applies. Go to Part 12.

Yes. Check all that apply above and fill in the details below for each business.

Employer Identification number

Dates business existed

Do not include Social Security number or ITIN.

Document Page 53 of 66 Case number (if known) Debtor 1 Terrell D Hanson 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. Yes. Fill in the details below. Name **Date Issued Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Terrell D Hanson Signature of Debtor 2 **Terrell D Hanson** Signature of Debtor 1 Date Date January 4, 2017 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

Entered 01/04/17 16:39:01

Case 17-80017

Doc 1

Filed 01/04/17

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Case 17-80017 Doc 1 Filed 01/04/17 Entered 01/04/17 16:39:01 Desc Main Document Page 54 of 66

| Fill in this inform | nation to identify your | case: | | | | |
|-----------------------------------|--|-----------------------|---------------------|--|-----------------------|--|
| Debtor 1 | Terrell D Hanson | | | | | |
| Debtor 2 | First Name | Middle Name | | Last Name | | |
| (Spouse if, filing) | First Name | Middle Name | | Last Name | | |
| United States Bar | nkruptcy Court for the: | NORTHERN DIST | RICT OF ILL | INOIS | | |
| Casa numbar | | | | | | |
| Case number (if known) | | | | | | ☐ Check if this is an amended filing |
| Official Fo | rm 108 | | | | | g |
| | | n for Indiv | iduals | Filing Under | ^r Chapter | 7 12/15 |
| | vidual filing under cha | • • • | out this for | m if: | | |
| _ | claims secured by yo | | | | | |
| You must file this | ver is earlier, unless th | ithin 30 days after | you file your | | | or the meeting of creditors, creditors and lessors you list |
| | ople are filing together d date the form. | r in a joint case, bo | th are equall | y responsible for suppl | ying correct info | rmation. Both debtors must |
| | nd accurate as possib our name and case nur | | needed, att | ach a separate sheet to | this form. On the | e top of any additional pages, |
| Part 1: List Yo | our Creditors Who Have | e Secured Claims | | | | |
| 1 For any credito | ore that you listed in D | art 1 of Schadula D | · Craditors V | Who Have Claims Secur | ed by Property ((| Official Form 106D), fill in the |
| information be | | art i oi Schedule D | . Creditors v | viio riave Cialilis Secui | ed by Froperty (C | |
| Identify the cre | ditor and the property t | hat is collateral | What do y secures a | ou intend to do with the debt? | property that | Did you claim the property as exempt on Schedule C? |
| | | | | | | |
| | tlemax of Illinois | | | ler the property. | | □ No |
| name: | | | | the property and redeem | | ■ Yes |
| Description of | 2008 Audi Q7 1780 | 000 miles | | he property and enter int mation Agreement. | o a | – 163 |
| property securing debt: | | | ☐ Retain t | he property and [explain] | : | |
| securing debt. | | | | | | |
| | ur Unexpired Persona | | | | | |
| in the information | n below. Do not list rea | al estate leases. Un | expired leas | | till in effect; the I | Leases (Official Form 106G), fill ease period has not yet ended. |
| Describe your ur | nexpired personal pro | nerty leases | | | v | Vill the lease be assumed? |
| Dood, IDO you. u. | ioxpirou porociiui proj | porty loaded | | | | The first loads by accumour |
| Lessor's name: | aad | | | | Г | □ No |
| Description of lease Property: | sed | | | | Γ | ☐ Yes |
| Lessor's name: | | | | | r | ¬ No |
| Description of leas | sed | | | | L | □ No |
| Property: | | | | | Г | ☐ Yes |
| Lessor's name: | | | | | Γ | □ No |

Statement of Intention for Individuals Filing Under Chapter 7

Official Form 108

Case 17-80017 Doc 1 Filed 01/04/17 Entered 01/04/17 16:39:01 Desc Main Document Page 55 of 66

| Debtor 1 | Terrell D Hanson | Case number (if known) |
|--------------------------------------|--|---|
| Description | on of leased | |
| Property: | | ☐ Yes |
| Lessor's | | □ No |
| Property: | on of leased | ☐ Yes |
| Lessor's | name: on of leased | □ No |
| Property: | | ☐ Yes |
| Lessor's name: Description of leased | | □ No |
| Property: | | ☐ Yes |
| Lessor's | | □ No |
| Description Property: | on of leased | ☐ Yes |
| Part 3: | Sign Below | |
| | nalty of perjury, I declare that I have indicated that is subject to an unexpired lease. | my intention about any property of my estate that secures a debt and any personal |
| | Ferrell D Hanson | x |
| | rell D Hanson ature of Debtor 1 | Signature of Debtor 2 |
| Date | January 4, 2017 | Date |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| + \$15 | trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-80017 Doc 1 Filed 01/04/17 Entered 01/04/17 16:39:01 Desc Main Document Page 60 of 66

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

| In re | Terrell D Hanson | | Case No. | | |
|-------------|--|---|--|--------------------------------|-------|
| | | Debtor(s) | Chapter | 7 | |
| | DISCLOSURE OF COMPE | NSATION OF ATTOR | RNEY FOR DE | BTOR(S) | |
| C | ursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016 ompensation paid to me within one year before the filing rendered on behalf of the debtor(s) in contemplation | ng of the petition in bankruptcy, | or agreed to be paid | to me, for services rendered o | r to |
| | | | | 830.00 | |
| | Prior to the filing of this statement I have received | | \$ | 830.00 | |
| | Balance Due | | \$ | 0.00 | |
| 2. \$ | 335.00 of the filing fee has been paid. | | | | |
| 3. T | he source of the compensation paid to me was: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 4. T | he source of compensation to be paid to me is: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 5. I | I have not agreed to share the above-disclosed comp | pensation with any other person | unless they are memb | pers and associates of my law | firm. |
| [| I have agreed to share the above-disclosed compens copy of the agreement, together with a list of the national control of the state of the national control of the state of th | | | | A |
| 6. I | n return for the above-disclosed fee, I have agreed to re | ender legal service for all aspects | s of the bankruptcy c | ase, including: | |
| b c. | Analysis of the debtor's financial situation, and render Preparation and filing of any petition, schedules, state Representation of the debtor at the meeting of credite [Other provisions as needed] Negotiations with secured creditors to be reaffirmation agreements and application secured control of the secured creditors to be reaffirmation agreements and application secured control of the secured creditors to be reaffirmation agreements and application secured control of the secured creditors to be reaffirmation agreements and application secured control of the secured creditors to be reaffirmation agreements and application secured creditors to be reaffirmation agreements. | tement of affairs and plan which ors and confirmation hearing, an reduce to market value; exe ons as needed; preparation | may be required; ad any adjourned hear emption planning; | ings thereof; | |
| 7. B | y agreement with the debtor(s), the above-disclosed fe Representation of the debtors in any dis any other adversary proceeding. | | | es, relief from stay action | s or |
| | | CERTIFICATION | | | |
| | certify that the foregoing is a complete statement of an nkruptcy proceeding. | y agreement or arrangement for | payment to me for re | presentation of the debtor(s) | in |
| Ja | nuary 4, 2017 | /s/ Karl C. Koonm | en | | |
| Da | - | Karl C. Koonmen | | | |
| | | Signature of Attorne Loves Park Legal | | | |
| | | The Professional | | | |
| | | 535 Loves Park D | | | |
| | | Loves Park, IL 61 815-654-3060 Fa | | | |
| | | Name of law firm | A. U IU-UU4-3U3U | | |

United States Bankruptcy Court Northern District of Illinois

| In re | Terrell D Hanson | | Case No. | |
|-------|--|---|---------------|---------------------------|
| | | Debtor(s) | Chapter | 7 |
| | VER | RIFICATION OF CREDITOR MAT | ΓRIX | |
| | | Number of Cr | editors: | 54 |
| | The above-named Debtor(s) h (our) knowledge. | hereby verifies that the list of creditors | s is true and | correct to the best of my |
| Date: | January 4, 2017 | /s/ Terrell D Hanson Terrell D Hanson Signature of Debtor | | |

Acceptance Now 5501 Headquarters Dr Plano, TX 75024

American Commenity Bank PO Box 182789 Columbus, OH

AmeriCash Loans, L.L.C. 880 Lee St, Ste 203 Des Plaines, IL 60016

AnnQuinetta Y Harrington-Robinson 2615 Pelham Road Rockford, IL 61103

Ashleys IRAC 7131 E State St Rockford, IL 61108

Barclays Bank Delaware Po Box 8803 Wilmington, DE 19899

Barrick SwitzerLong Balsley Van Eve 6833 Stalter Dr Rockford, IL 61108

Capital One, N.a. Po Box 30273 Salt Lake City, UT 84130

Chase Auto
P.o. Box 901003
Fort Worth, TX 76101

Chase Bank 4425 Harrison Ave Rockford, IL 61108

Cheryl Meardle Common Boundary Wellness 4873 Manhattan Dr Rockford, IL 61108 Chicago lake Shore Hospital 4840 N Marine Dr Chicago, IL 60640

City of Belvidere Water 401 Whitney Blvd Belvidere, IL 61008

Comcast PO Box 3001 Southeastern, PA 19398-3001

Comenity Bank/american Po Box 182789 Columbus, OH 43218

Commonwealth Edison PO Box 6111 Carol Stream, IL 60197-6111

Credit First N A 6275 Eastland Rd Brookpark, OH 44142

Credit One Bank Na Po Box 98872 Las Vegas, NV 89193

Creditors Protection Service 202 W. State Street Ste 300 Rockford, IL 61101

Dr. Curt Degner 502 Logan Ave Belvidere, IL 61008

Dsnb Macys Po Box 8218 Mason, OH 45040

Fed Loan PO Box 69184 Harrisburg, PA 17106-9184 First Community Cu Of 1702 Park Ave Beloit, WI 53511

Glenwood Center 2823 Glenwood Avenue Rockford, IL 61101-3599

IL Dept of Employment 3033 S State St 10th Floor Chicago, IL 60603

IL dept of Revenue

IL Dept of Security PO Box 19286 Springfield, IL 62794-9286

IL Dept of Security PO Box 19286 3033 S State Street 10th Floor Chicago, IL 60603

IRS
Department of the Treasury
Kansas City, MO 64999-0030

IRS Austin, TX 73301-0010

IRS PO Box 802501 Cincinnati, OH 45208-2501

Juniper Card Services PO Box 8801 Wilmington, DE 19899-8801

Karyn Martin Bohl 1201 S Phleps Ave, Ste 812 Rockford, IL 61108 Laura Hunt, Attorney 815 N Church St Rockford, IL 61103

Miramedrg 991 Oak Creek Dr Lombard, IL 60148

Montessori Private Academy 8101 Sayer Road Rockford, IL 61108

Navient Po Box 9500 Wilkes Barre, PA 18773

Nelnet Lns Po Box 1649 Denver, CO 80201

Nicor Gas 4651 Linden Road Rockford, IL 61109

Northwest Credit Collectors 245 Main St Scranton, PA 18519-1641

PCN Bank National Association 15W030 N Frontage Road, Ste 100 Willowbrook, IL 60527

Personal Finance 270 N Myulford Road, Ste 141 Rockford, IL 61107

Personal Finance/p326

Pnc Mortgage Po Box 8703 Dayton, OH 45401 Portfolio Recovery Ass 120 Corporate Blvd Ste 1 Norfolk, VA 23502

Pumilia Family Dental 755 S Mulford Road Rockford, IL 61108

Rockford Health Physicians Dept 4701 Carol Stream, IL 60122-4701

Rockford Memorial Hopital Dept 4628 Carol Stream, IL 60122

Rockford Memorial Hopital 2400 N Rockton Ave Rockford, IL 61103

Steven Whitmore Attorney Law Offices of Shriver, Oneill & Th 515 N Court St Rockford, IL 61103

The Student Loan Help Center Accounting Dept 2660 Cypress Ridge Blvd, Ste 101 Wesley Chapel, FL 33544

Titlemax of Illinois 2298 Gateway Center Dr Belvidere, IL 61008

Transworld Systems 500 virginia Dr, Ste 514 Fort Washington, PA 19034

Verizon Wireless P>O> Box 25505 Lehigh Valley, PA 18002-5505